

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>HS</i>		9-24-98
O.I.P.E. CLASSIFIER		31	9/28/98
FORMALITY REVIEW	<i>ML</i>	71629	10-6-98

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	7/21/98
2	✓	✓	7/21/98
3	✓	✓	7/21/98
4	✓	✓	7/21/98
5	✓	✓	7/21/98
6	✓	✓	7/21/98
7	✓	✓	7/21/98
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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